



Eli Lilly and Company

Lilly Corporate Center  
Indianapolis, Indiana 46285  
U.S.A.  
+1.317.276.2000  
www.lilly.com

April 13, 2021

Senator Heather Sanborn, Chair  
Representative Denise Tepler, Chair  
Joint Standing Committee on Health Care, Insurance and Financial Services  
Cross Building Room 220  
100 State Street  
Augusta, ME 04333

Dear Senator Sanborn and Representative Tepler,

Eli Lilly and Company (Lilly) respectfully opposes Legislative Document (LD) 673, which mandates insulin manufacturers provide free and heavily discounted insulin through the proposed state insulin safety net programs. We agree that patients should be able to afford their insulin. However, Lilly opposes this bill because there are more efficient and less costly solutions to reduce patients' out-of-pocket (OOP) costs for insulin, including Lilly's own insulin affordability programs. Further, we believe LD 673 raises constitutional concerns under the United States Constitution.

**Lilly has programs in place that help people access affordable insulin**

LD 673 requires that certain insulin manufacturers give away (or reimburse pharmacies for providing) insulin to patients under two new programs: an urgent need safety net program and an ongoing patient assistance program. While we agree with legislators that all patients should have access to affordable insulin coverage, LD 673 creates programs that are redundant to (and in some cases, less generous than) existing programs implemented by Lilly, other insulin manufacturers, and third party charitable organizations. These programs are already available to help Maine residents with insulin access and affordability.

Over the past several years, Lilly has voluntarily implemented cost-sharing solutions to have an immediate impact for those who have difficulty affording Lilly insulins. **Our solutions help up to 20,000 people each month.** Lilly is committed to ensuring that no one goes without the insulin that they need:

- Patients with commercial health insurance or who are uninsured can enroll in the Lilly Insulin Value Program and receive a \$35 copay card for their entire monthly prescription.<sup>1</sup>
- As of January 2021, Medicare Part D members enrolled in participating insurance plans can access Lilly insulin for \$35 per monthly prescription through its Medicare Part D Senior Savings Model.<sup>2</sup>
- Patients with commercial insurance are eligible for automatic patient discounts at participating pharmacies, which are designed to cap the cost of an entire month's prescription at approximately \$95.<sup>3</sup>

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<sup>1</sup> Pursuant to federal government guidance, government beneficiaries are ineligible for copay cards and automatic patient discounts. Terms, conditions and limitations apply.

<sup>2</sup> Seniors must have enrolled in a participating Medicare Part D plan in the 2020 open enrollment period (October 15 – December 7) to ensure they are eligible for this benefit. The Lilly Diabetes Solution Center can help guide individuals through this process. For more information about the Medicare Part D Senior Savings Model, see: <https://innovation.cms.gov/innovation-models/part-d-savings-model>.

<sup>3</sup> Note: the Lilly Insulin Value Program and the automatic discounts are available for individuals in commercial plans. In order to participate in the Lilly Insulin Value Program (to get a \$35 copay coupon) the individual must contact the LDSC, while the \$95 cap is applied automatically at the pharmacy.

- Patients can obtain three non-branded insulins with a list price 50% lower than their Lilly brand alternative. These insulins can be ordered by any pharmacist and are typically delivered in 1-2 business days.

People who use Lilly insulin can find out about these programs by calling **the Lilly Diabetes Solution Center (LDSC)**. Attachment A provides an overview of these programs and includes additional details on how to contact the LDSC.

In addition to Lilly's affordability solutions, Lilly donates insulin to various third-party charitable organizations that serve low-income patients.<sup>4</sup> For example:

- Lilly donates Humalog and Humulin® (insulin human injection) to three relief agencies – Americares, Direct Relief, and Dispensary of Hope – to supply nearly 300 free clinics across the United States. Qualifying patients with lower income who have an immediate need for insulin can access Lilly insulin through these free clinics.
- Lilly donates insulins to the Lilly Cares Foundation, a separate charitable organization. Patients with lower income who are uninsured or who have Medicare Part D coverage can apply to the Lilly Cares Foundation Patient Assistance Program to request free access to their insulin from the Lilly Cares Foundation.<sup>5</sup>

#### **Similar state law demonstrates why this legislation is not needed**

LD 673 is based on a law passed in Minnesota in 2020.<sup>6</sup> While Lilly believes that the Minnesota law is unconstitutional<sup>7</sup> and that there are more effective ways to provide low-cost insulin to people who need help, we have complied with requirements since they went into effect in July 2020.

In the six months following the implementation of the Minnesota law, 104 residents received Lilly insulin via the Minnesota programs.<sup>8</sup>

In contrast, Lilly's other affordability programs help up to 20,000 people each month. **And all 104 of the individuals who participated in Lilly's Minnesota programs would have qualified for Lilly's other affordability programs, or for free goods programs operated by charitable organizations.**<sup>9</sup> LD 673 would put in place redundant and – in some cases – less generous programs, and will result in additional administrative burdens for the state and manufacturers.

#### **Lawmakers should consider other policy solutions to help patients access affordable insulin**

Lilly is committed to providing affordability options, and we continue to evaluate how financial needs are best met, but broader reform is needed to move us from a series of patchwork solutions to systematic change that helps people with affordability.

<sup>4</sup> Each charitable organization independently establishes eligibility requirements and makes eligibility determinations.

<sup>5</sup> For more information about the Lilly Cares Foundation, including eligibility requirements, see <https://www.lillycares.org>.

<sup>6</sup> See the LD 673 summary: <http://legislature.maine.gov/legis/bills/getPDF.asp?paper=SP0260&item=1&snum=130>. Accessed April 5, 2021.

<sup>7</sup> The Minnesota law implicates the Takings Clause of the Fifth Amendment to the United States Constitution. LD 673 raises similar concerns.

<sup>8</sup> 91 individuals accessed insulin through Lilly's Minnesota Urgent Need Program, and 13 accessed insulin through Lilly's Minnesota Patient Assistance Program.

<sup>9</sup> Based on the publicly stated eligibility requirements established by each charitable organization. For example, current eligibility requirements for the Lilly Cares Foundation can be found at <https://www.lillycares.org>.



Lilly commends Maine legislators for passing a copay cap law in 2020 that limits the OOP costs that patients are required to pay for prescription insulins and diabetes supplies. Lilly supports these efforts to cap patients' cost-sharing for insulins, which are being enacted in many states. In addition to copay caps, we encourage legislators to explore policy solutions that more directly help patients with their OOP costs, including:

- passing rebates paid to PBMs on to the patient at the pharmacy counter;
- requiring state-regulated health plans to provide first dollar coverage for insulins; and,
- ensuring that people are aware of and enroll in applicable state and federal health care programs to enable affordable access to medicines.

In addition, legislators could promote existing patient assistance programs available for patients who have difficulty accessing or affording their insulin. For example, Beyond Type 1, a non-profit diabetes education and advocacy organization, recently launched "getinsulin.org," a single web-portal that allows patients to find applicable insulin patient assistance programs, regardless of insulin manufacturer. This tool will also help simplify the process for those who use insulins from multiple companies. Lawmakers could encourage constituents to visit this website to find existing affordability programs.

We are eager to work with stakeholders and elected officials on these common-sense, patient-centered policy solutions as alternatives to LD 673. These much-needed reforms will provide lasting relief to those who struggle to afford their insulin. In the meantime, Lilly will continue providing affordability solutions to people who need them. The health of people living with diabetes is too important.

Thank you for the opportunity to comment on LD 673. I am happy to meet with you individually to discuss Lilly's insulin affordability programs and answer any questions that you may have about the program, or the policy alternatives suggested in this letter.

Sincerely,



Kathy Bilotas, MPH  
Director of State Government Affairs (MA, CT, ME, & RI)

**Eli Lilly and Company**

617-285-6512 (mobile)

[bilotas\\_katherine@lilly.com](mailto:bilotas_katherine@lilly.com) | [www.lilly.com](http://www.lilly.com)

## Attachment A

### LILLY DELIVERS INSULIN AFFORDABILITY

In 2021 a Lilly insulin prescription can be filled for \$35 a month regardless of insurance status. Although the vast majority of people have affordable access to their Lilly insulin, there are still gaps in the U.S. health care system that leave some Americans struggling to afford their medication. No one should have to ration insulin when managing their diabetes, which is why Lilly offers a suite of affordability programs designed to help people reduce out-of-pocket expenses, especially those without insurance, seniors with Medicare Part D plans, and people enrolled in a high-deductible health plan.



#### LILLY DIABETES SOLUTION CENTER

To learn more about Lilly's affordability programs and eligibility, call the Lilly Diabetes Solution Center at 1-833-808-1234 or visit [www.insulinaffordability.com](http://www.insulinaffordability.com).

#### LILLY'S INSULIN AFFORDABILITY PROGRAMS



##### LILLY INSULIN VALUE PROGRAM<sup>1</sup>

- \$35 monthly prescription for Lilly insulin formulations
- Anyone without insurance or with commercial insurance may qualify



##### PART D SENIOR SAVINGS

- Monthly supply of available formulations of Lilly's insulins for \$35
- Must be enrolled in participating Medicare Part D insurance plan



##### LILLY'S NON-BRANDED INSULINS<sup>2</sup>

- Lilly's most commonly used formulations with a 50% lower list price than their brand alternative
- Any pharmacist can order these insulins and, if not already stocked, they are typically delivered in 1-2 business days



##### IMMEDIATE NEED

- Patients with an immediate need for their Lilly insulin can contact the Lilly Diabetes Solution Center to receive assistance

	COMMERCIAL INSURANCE	UNINSURED	MEDICARE PART D
LILLY INSULIN VALUE PROGRAM	✓	✓	
NON-BRANDED INSULINS	✓	✓	✓
AUTOMATIC PATIENT DISCOUNTS	✓		
PART D SENIOR SAVINGS MODEL			✓

In addition to Lilly's affordability solutions, Lilly donates product to charitable organizations, including those supporting free clinics, which provide donated product at no cost to qualifying patients with financial challenges.<sup>3</sup>

Know somebody in the U.S. who uses an insulin not manufactured by Lilly?  
They can visit <https://getinsulin.org> to find assistance.



Most of Lilly's affordability solutions are accessible through the Lilly Diabetes Solution Center. People using Lilly insulins may contact the Lilly Diabetes Solution Center (1-833-808-1234) for a confidential conversation with a representative to determine eligibility and program access based on their individual circumstances.

1. Terms, conditions, and limitations apply to the co-pay cards. Not available to those patients with government insurance such as Medicaid, Medicare, Medicare Part D, TRICARE/CHAMPUS, Medicaid, DOD, or any State Patient or Pharmaceutical Assistance Program. Participation required.

2. A patient can work with their pharmacy to obtain Lilly's lower-priced insulin options. A patient should contact the Lilly Diabetes Solution Center for additional information if they are unable to obtain the lower-priced insulin through their pharmacy.

3. Each charitable organization independently establishes its own eligibility requirements and makes its own eligibility determinations.

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